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ler (Wilde prize), killed June 9, 1915, well known for his researches in ballistics.

### UNIVERSITY AND EDUCATIONAL NEWS

By the will of the late Dr. J. William White, trustee of the University of Pennsylvania, and John Rhea Barton emeritus professor of surgery, \$150,000 is bequeathed in trust as a permanent endowment fund, the income to be used for establishing a professorship of surgical research in the medical department of the university. Other bequests were made to the university hospital.

A MILLION dollars will be available for use by the Washington University Medical School, with the opening of the new term in September, through the donation to the school of \$166,000 each by Edward Mallinckrodt and John T. Milliken, of St. Louis. One fund of \$500,000, which will be known as the Edward Mallinckrodt Fund, will be devoted to teaching and research work in pediatrics. The other fund of \$500,000, which will be known as the John T. Milliken Fund, will be devoted to teaching and research work in medicine. The funds will enable the medical school to employ physicians in these departments for their full time. The amount in addition to the Mallinckrodt and Milliken donations to bring it to \$1,000,000 has been given by the General Education Board.

A MOVEMENT has been inaugurated to secure at least \$2,000,000 additional endowment for Jefferson Medical College, Philadelphia. Mr. David Baugh, a member of the board of trustees, and founder of the Baugh Institute of Anatomy and Biology, has subscribed \$100,000, provided that an equal amount is raised on or before June 16. The money so obtained is to be used for permanent endowment.

THE executors of the estate of Emil C. Bundy, of New York, have paid over to Columbia University the sum of \$100,000, for research work in cancer.

DR. JEAN PICCARD, of the University of Lausanne, Switzerland, has been appointed assistant professor of chemistry in the Univer-

sity of Chicago, beginning with the autumn quarter of this year. Professor Piccard is of the same nationality as the late Professor John Ulric Nef, who for more than twenty years was the distinguished head of the department of chemistry.

DR. HENRY W. WANDLESS, of New York, has been appointed clinical professor of ophthalmology at the University and Bellevue Hospital Medical College.

WM. F. ALLEN, formerly instructor of histology and embryology in the University of Minnesota, has accepted the position of professor of anatomy in the University of Oregon Medical School, Portland, Oregon.

AT Vassar College Dr. Elizabeth B. Cowley, assistant professor of mathematics, has been promoted to an associate professorship.

SIR JAMES ALFRED EWING, K.C.B., F.R.S., has been elected principal of the University of Edinburgh, in succession to the late Sir William Turner. Sir Alfred Ewing, who is a graduate of the university, has been for the last thirteen years director of naval education; before that he had been in succession professor of mechanical engineering in the Imperial University, Tokyo; of engineering in University College, Dundee, and of applied mechanics in the University of Cambridge. His scientific work has been chiefly in the investigation of magnetism and the physics of metals.

### DISCUSSION AND CORRESPONDENCE

#### PUBLIC HEALTH WORK AND MEDICAL PRACTISE

TO THE EDITOR OF SCIENCE: To the statement that no sharp line can properly be drawn between preventive medicine as embraced in public health work and curative medicine as applied to individuals Mr. Harold F. Gray in SCIENCE for May 5 has applied the term "fallacious." While it may in general be true that "under our form of government, it is not possible for public health officers to apply by compulsion remedies to diseased citizens," it is also true that in a democracy a large share of public health work lies outside the field of arbitrary compulsion.

Quarantine of individuals afflicted with communicable disease represents one of the earliest and most arbitrary of public health measures. The stoning of a leper to keep him away from a community without regard to the welfare of the leper himself is not, however, to be regarded as a sign of a high stage of civilization. We reach a higher stage when special provision is made for the care of lepers isolated from the community for the good of the community. We reach a still higher stage when earnest efforts are made to discover remedies for the cure of the disease such as are now being made by the federal health service. If such remedies are discovered and applied, both lepers and the community at large will profit.

The legal aspects of the matter are well summarized in a decision of the Wisconsin Supreme Court as cited in "Communicable Diseases: An analysis of the laws and regulations for the control thereof in force in the United States," Public Health Bulletin No. 62, by J. W. Kerr and A. A. Moll.

The right of a state through its proper officers to place in confinement and to subject to regular medical treatment, those who are suffering from some contagious or infectious disease, on account of the danger to which the public would be exposed if they were permitted to go at large is so free from doubt that it has rarely been questioned (*State v. Berg* Northwestern Reporter, p. 347).

The federal public health service has charge of the restrictions imposed upon individuals afflicted with disease who desire to enter the United States from outside and is required to cooperate with local health authorities in enforcing regulations to prevent the spread of contagious and infectious diseases from one state or territory to another.

In connection with the medical inspections of immigrants, medical officers are required, among other things, to certify to the diseases observed by them and to render opinions, whenever requested, as to the curability of a loathsome contagious or dangerous contagious disease affecting the wife or minor child of a domiciled alien, and to supervise the appropriate treatment. In addition they are required to supervise or conduct the treatment of all detained aliens.

In the various states of the union the number of diseases for which quarantine is required by law and the extent of the quarantine differ greatly but it is fairly generally recognized that in cases where strict quarantine is required the public is under obligations to furnish treatment at least to individuals not able to pay for medical service. The quarantine is compulsory, the treatment is not necessarily so, but both may properly form a part of the public health service. At times special care has been taken to emphasize the fact that individuals thus receiving medical service at public expense are not thereby made paupers.

Private agencies may cooperate with public health officials in the warfare on disease through treatment of individuals. The various anti-tuberculosis associations are accomplishing much in their efforts not only to educate the public as to proper precautions to be taken to prevent the spread of this disease but also in their support of measures for the establishment of sanatoria for the treatment of incipient cases and homes for the isolation of advanced cases. The effective work of the Rockefeller Sanitary Commission in cooperation with various boards of health in the south for the eradication of hookworm disease is an example of where medical treatment of individuals in the ordinary use of that term has played an active part in public health work.

Various steps have been taken to give state aid to physicians in their treatment of individuals in order that the public health may be promoted. Examples are to be seen in the distribution of diphtheria antitoxin free either for all cases or more frequently for all indigent cases. Vaccines for smallpox and typhoid fever are distributed in a similar way for the prophylactic treatment of individuals, from which in turn the community profits. Public health laboratories established to give aid in diagnosis to physicians in private practise are becoming of increasing importance from the standpoint of public health. It is thus that the first steps are being taken in control of venereal diseases.

In public health work we have, on the one hand, engineering problems into which dis-

eased individuals as such do not enter. On the other hand we have the problem of the prevention of the spread of diseases from the sick to the well. In private practise we have, on the one hand, the treatment of sick individuals in whose welfare the public as such, aside from humane sympathy or the danger of attendant financial burdens, has no concern and, on the other hand, the treatment of individuals who so long as they are ill are of more or less danger to the community at large. The fields of the sanitarian in the prevention of the spread of disease from one individual to another and of the private practitioner in his care of individuals afflicted with communicable disease interweave. The duty of the public health officer is to see that such persons are cared for in a way that prevents so far as possible the spread of disease. The private practitioner attending such individuals is required to observe regulations in the interest of the public health. Questions of public interest should determine to what extent treatment of individuals by private practitioners should be supplemented by state officers. There certainly need be no fear that medical treatment furnished sane adult individuals for their own welfare by public officials will be forced on them at the expense of their individual liberty. In medical supervision in the public schools it has not yet been determined to what extent medical inspection of the school children should be supplemented by furnishing medical treatment at public expense, but such treatment is likely to increase in the future. In the assumption by the public of responsibility for the health of children as individuals, a responsibility that is beginning to extend back of the school years, public health duties are assumed which reach far beyond the control of contagious diseases and are of great importance to the welfare of the race. Perhaps some time we shall see in times of peace as effective a medical service as nations which desire success must have for their armies in times of war. Here we see no line drawn between services for preventive medicine and curative medicine. Fortunately our own army medical service has been able to furnish some of the most important recent advances in pre-

ventive medicine, of value alike in times of peace and times of war, an interesting summary of which has recently been given by Henry B. Hemenway.<sup>1</sup> It is noteworthy that the most important American contributions both to the science of public health and to the application of this science have been made by medical services which include within their scope research, prevention and treatment, the Army Medical Service and the Federal Public Health Service.

C. R. BARDEEN

#### NOMENCLATORIAL CONSISTENCY?

NOTHING more strikingly illustrates the hopelessness of unanimity among systematists on nomenclatorial matters than a footnote in a recent article by Mr. Hebard, *Ent. News*, Vol. XXVII., p. 17 (1916). Here he protests strenuously against the resurrection of the orthopterous genus *Pedeticum* of McNeill, which he maintains is preoccupied by the hemipterous genus *Pedeticus* of Laporte. But these two names do not conflict according to the apparent meaning of Article 36 of the International Rules of Zoological Nomenclature, where it is recommended that names even derived from the same radical and differing from each other only in termination are not to be considered as conflicting. Furthermore, opinion 25 of the International Commission bears directly on this subject, quotes from the above mentioned recommendations and decides that *Damesella* does not conflict with *Damesiella*. Dr. C. W. Stiles, the secretary of the International Committee on Zoological Nomenclature, and our foremost authority on nomenclature, when consulted regarding the matter of *Pedeticum* and *Pedeticus*, expressed the opinion that these two names should not be considered as conflicting. But Mr. Hebard contends that the ornithologists and mammalogists have long ago settled this matter, the one-letter rule being suppressed unless indicating different word derivation. This being true, how about those, including Mr. Hebard himself, who profess themselves followers of the International Rules? Is it to be assumed

<sup>1</sup> "American Health Protection," Bobbs-Merrill Company, 1916.